POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	ꓤꓤ	70504	Jb
O.I.P.E. CLASSIFIER		CE	1-20-00
FORMALITY REVIEW		70611	3/17/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔ .... Rejected
= .... Allowed
— (Through numeral)... Canceled
÷ .... Restricted

N .... Non-elected
I .... Interference
A .... Appeal
O .... Objected

Claim		Date					
Final	Original	2/3/63	4/9/03	8/5/03	6/5/03	3/23/04	
1		✔	✔	✔	✔	✔	
2		O	O	O	O	✔	
3		✔	✔	✔	✔	✔	
4		O	O	O	O	O	
5		O	O	O	O	O	
6		O	O	O	O	O	
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20		O	O	O	O	✔	
21		✔	✔	✔	✔	✔	
22		O	O	O	O	O	
23		O	O	O	O	O	
24		O	O	O	O	O	
25		=	=	÷	=	=	
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If more than 150 claims or 10 actions
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